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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	art 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Carmen  First name  L.  Middle name  Constantinople, Jr.  Last name and Suffix (Sr., Jr., II, III)		Donna First name  M. Middle name  Constantinople Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2947		xxx-xx-1014		

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Debtor 1 Carmen L. Constantinople, Jr. Debtor 2 Donna M. Constantinople

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	23 Pomona Drive	If Debtor 2 lives at a different address:
		Barnegat, NJ 08005  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Ocean County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other
		other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 1 otor 2	Carmen L. Consta Donna M. Constan					Case number (if known)	
Par	rt 2:	Tell the Court About \	our Ba	ankruptcy C	ase			
7. The chapter of the Bankruptcy Code you are					brief description of each, , go to the top of page 1 a		l by 11 U.S.C. § 342(b) for Indi oriate box.	viduals Filing for Bankruptcy
	choosing to file under		☐ Ch	apter 7				
			☐ Ch	apter 11				
			☐ Ch	apter 12				
			■ Ch	apter 13				
8.	How	you will pay the fee		about how yo	ou may pay. Typically, if y attorney is submitting yo	ou are paying the fe	e yourself, you may pay with c	rour local court for more details ash, cashier's check, or money with a credit card or check with
					y the fee in installments ee in Installments (Officia		option, sign and attach the App	olication for Individuals to Pay
				I request the	at my fee be waived (Yo quired to, waive your fee,	u may request this o and may do so only	if your income is less than 150	hapter 7. By law, a judge may, % of the official poverty line that se this option, you must fill out
							Official Form 103B) and file it v	
9.	bank	you filed for cruptcy within the	■ No					
	last	3 years?	☐ Yes					
				District		When	Case number	
				District		When When	Case number	
				District		when	Case number	ai
10.	case filed	any bankruptcy s pending or being by a spouse who is	■ No	S.				
	you,	iling this case with or by a business ner, or by an ate?						
				Debtor			Relationship	to you
				District		When	Case number	, if known
				Debtor			Relationship	to you
				District		When	Case number	r, if known
11.		ou rent your	■ No.	Go to	line 12.			
	resid	lence?	☐ Yes	s. Has yo	our landlord obtained an	eviction judgment ag	ainst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial State</i> this bankruptcy petition.		ion Judgment Against You (Fo	rm 101A) and file it as part of

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	tor 1 Carmen L. Consta tor 2 Donna M. Constar		, Jr.	Case number (if known)
Dog	2. Domost About Assu Bu		Vau Own as a Sala Branci	***
Part		sinesses	You Own as a Sole Proprie	2101
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bu	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach			
it to this petition.				ox to describe your business:
				ness (as defined in 11 U.S.C. § 101(27A))
			_ •	Il Estate (as defined in 11 U.S.C. § 101(51B))
			_ `	defined in 11 U.S.C. § 101(53A))
			· · · · · · · · · · · · · · · · · · ·	er (as defined in 11 U.S.C. § 101(6))
			■ None of the above	re .
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline: operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention
14.	Do you own or have any property that poses or is	■ No.		
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number Otract City Class 9, 7% Code
				Number, Street, City, State & Zip Code

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Debtor 1 Carmen L. Constantinople, Jr.
Debtor 2 Donna M. Constantinople Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-24822-CMG Doc 1 Filed 07/31/19 Entered 07/31/19 11:47:09 Desc Main Document Page 6 of 61

	tor 1 Carmen L. Consta tor 2 Donna M. Consta		, Jr.		Case number (i	f known)
Part	6: Answer These Quest	ions for R	Reporting Purposes			
	What kind of debts do you have?	16a.	Are your debts primarily consur individual primarily for a personal,			d in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busines money for a business or investmen			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe th	at are not consu	mer debts or business o	debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to line 18.		
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7. Do you are paid that funds will be available			y is excluded and administrative expenses
	administrative expenses are paid that funds will		□ No			
	be available for		☐ Yes			
	distribution to unsecured creditors?					
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		☐ 25,001-50,000
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 10,001-25,0		☐ 50,001-100,000 ☐ More than100,000
		☐ 100-1 ☐ 200-9		□ 10,001-25,0	000	☐ More than 100,000
19.	How much do you	□ \$0 - \$	\$50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		001 - \$100,000	\$10,000,00		□ \$1,000,000,001 - \$10 billion
			,001 - \$500,000 ,001 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
		<b>—</b> \$500,				
20.	How much do you estimate your liabilities	□ \$0 - \$		\$1,000,001		□ \$500,000,001 - \$1 billion
	to be?		001 - \$100,000 ,001 - \$500,000	□ \$10,000,00°	1 - \$50  million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			,001 - \$300,000 ,001 - \$1 million		01 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below					
	you	I hove ov	xamined this petition, and I declare u	under nenelty of	novices that the informat	ion provided in two and powerest
FOI	you		• • •	. ,	, ,	•
			chosen to file under Chapter 7, I am tates Code. I understand the relief a			der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.
			orney represents me and I did not pa nt, I have obtained and read the noti			n attorney to help me fill out this
		I request	t relief in accordance with the chapte	er of title 11, Unit	ed States Code, specifi	ed in this petition.
		I underst bankrupt and 357	tcy case can result in fines up to \$25	ealing property, 50,000, or imprise	or obtaining money or p onment for up to 20 yea	roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,
		/s/ Carr	nen L. Constantinople, Jr.		/s/ Donna M. Cons	
			n L. Constantinople, Jr. e of Debtor 1		<b>Donna M. Constar</b> Signature of Debtor 2	itinopie
		Executed	d on July 31, 2019		Executed on July 3	31, 2019
			MM / DD / YYYY		MM / E	DD / YYYY

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Debtor 1 Carmen L. Const Debtor 2 Donna M. Consta	• •	Case number	· (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have explained	the relief available under each chapter
If you are not represented by	, ,		
an attorney, you do not need to file this page.		, <b>,</b>	, , ,
	/s/ Brian S. Thomas	Date July 3	1, 2019
	Signature of Attorney for Debtor		DD / YYYY
	Brian S. Thomas		
	Printed name		
	Brian S. Thomas, LLC Firm name		
	327 Central Ave.		
	Suite 103		
	Linwood, NJ 08221		
	Number, Street, City, State & ZIP Code		
	Contact phone <b>609-601-6066</b>	Email address <b>bria</b>	n@brianthomaslaw.com

026651980 NJ Bar number & State

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Fill in this information to identify your case:					
Debtor 1	Carmen L. Consta	antinople, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2	Donna M. Consta	ntinople			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JEI	RSEY		
Case number _					
(if known)				☐ Check if the camended	

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		•
Par	t 1: Summarize Your Assets		_
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	211,400.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	35,702.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	247,102.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	128,331.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	746.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	72,459.00
	Your total liabilities	\$	201,536.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,040.66
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,584.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 2	Donna M. Constantinople	Case number (if known)	
	n the <i>Statement of Your Current Monthly Income</i> : Cop A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 L		\$ 4,882.06

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Carmen L. Constantinople, Jr.

	Total cla	nim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	746.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	746.00

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				Doc	ument Page 10 of 61					
Fill i	n this inform	nation to identify	your case and th	nis filinç	j:					
Debt	tor 1	Carmen L. C	Constantinople,	Jr.						
		First Name	Middle	Name	Last Name					
	tor 2	Donna M. Co	onstantinople	None	LastNama					
(Spou	ise, if filing)	First Name	Middle	Name	Last Name					
Unite	ed States Bar	nkruptcy Court for	the: DISTRICT	OF NE	V JERSEY					
Case	e number							☐ Check if this amended fili		
Sc In eac think inforn	hedule ch category, se it fits best. Be	e as complete and space is needed,	roperty lescribe items. List accurate as possible	e. If two	only once. If an asset fits in more than or married people are filing together, both ar nis form. On the top of any additional page	e equally resp	onsible for su	pplying correct	-	
_	No. Go to Part Yes. Where is									
1.1				What	is the property? Check all that apply					
	23 Pomona				Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :				
	Street address, if	f available, or other des	scription		Duplex of multi-unit building Creditors			iount of any secured claims on Schedule D: ors Who Have Claims Secured by Property.		
	Barnegat	NJ	08005-0000		Manufactured or mobile home Land	Current va		Current value of portion you own		
	City	State	ZIP Code		Investment property	\$2	10,000.00	\$210,00	00.00	
					Timeshare	Describe t	he nature of v	our ownership inte	erest	
		☐ Other			(such as fo	ee simple, ten	ancy by the entireti			
				Who	has an interest in the property? Check one	a life estat	e), if known.			
	Ocean				Debtor 1 only Debtor 2 only					
-	County			_	Debtor 1 and Debtor 2 only					
	County			Check if this is o				munity property		
					At least one of the debtors and another r information you wish to add about this ite	,	,			
					erty identification number:	, 5 40 10				

Official Form 106A/B Schedule A/B: Property page 1

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lf v	you own or hav	ve more	than one, list h	ere:			
.2					is the property? Check all that apply		
	890 Harding Highway Street address, if available, or other description				Single-family home	Do not deduct secured cla	
Stre	eet address, if available	, or other des	scription		Duplex or multi-unit building	Creditors Who Have Clair	
					Condominium or cooperative		
			☐ Manufactured or mobile home		Current value of the	Current value of the	
Вι	ıena	NJ	08310-0000		Land	entire property?	portion you own?
City	,	State	ZIP Code		Investment property	\$700.00	\$700.0
					Timeshare	Describe the nature of y	our ownership interest
					Other	(such as fee simple, ten a life estate), if known.	ancy by the entireties, o
				Who r	has an interest in the property? Check one  Debtor 1 only	a me estatej, ii known.	
At	lantic				Debtor 2 only		
Cou	ınty				Debtor 1 and Debtor 2 only		
					At least one of the debtors and another	Check if this is com (see instructions)	nmunity property
					information you wish to add about this iten	n, such as local	
				Bloc	k 1403, Lot 5		
.3 <b>If</b> y	you own or hav	ve more	than one, list h	iere:	ly owned with debtor's deceased f	father	
.3 <b>89</b>	0 Harding High	nway		iere:	ly owned with debtor's deceased t	Do not deduct secured cla	
.3 <b>89</b>		nway		nere: What	is the property? Check all that apply	Do not deduct secured cla	d claims on Schedule D:
.3 <b>89</b>	0 Harding High	nway		nere: What	is the property? Check all that apply Single-family home	Do not deduct secured cla	d claims on Schedule D:
.3 <b>89</b>	0 Harding High	nway		ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building	Do not deduct secured class the amount of any secure Creditors Who Have Claim	d claims on Schedule D: ms Secured by Property.
.3 <b>89</b> Stre	0 Harding High	nway		ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured cla	d claims on Schedule D:
.3 <b>89</b> Stre	0 Harding High set address, if available uena	nway , or other des	scription	ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured class the amount of any secure Creditors Who Have Claim	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?
.3 <b>89</b> Stre	0 Harding High set address, if available uena	nway , or other des	08310-0000	ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$700.0
.3 <b>89</b> Stre	0 Harding High set address, if available uena	nway , or other des	08310-0000	ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property? \$700.00  Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0
.3 <b>89</b> Stre	0 Harding High set address, if available uena	nway , or other des	08310-0000	ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$700.00  Describe the nature of y	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0
.3  89 Stree	0 Harding High set address, if available uena	nway , or other des	08310-0000	ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property? \$700.00  Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0
.3  89 Stree	O Harding High set address, if available uena	nway , or other des	08310-0000	what	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property?  \$700.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0  rour ownership interest ancy by the entireties, c
.3  89 Stree  BL City	O Harding High set address, if available uena	nway , or other des	08310-0000	ere: What	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property? \$700.00  Describe the nature of y (such as fee simple, ten	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0  rour ownership interest ancy by the entireties, o
.3  89 Stree  BL City	O Harding High set address, if available uena	nway , or other des	08310-0000	ere: What  Understand the second seco	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair  Current value of the entire property? \$700.00  Describe the nature of y (such as fee simple, ten a life estate), if known.	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0  rour ownership interest ancy by the entireties, c
.3  89 Stree  BL City	O Harding High set address, if available uena	nway , or other des	08310-0000	what  What  Who be Continued to the proper  Bloc	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another information you wish to add about this item	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property? \$700.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Check if this is com (see instructions)  n, such as local	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0  rour ownership interest ancy by the entireties, c
.3  89 Stree  BL City	O Harding High set address, if available uena	nway , or other des	08310-0000	what  What  Who be Control  Other prope Bloc	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another information you wish to add about this item erty identification number: ek 1403, Lot 9	Do not deduct secured class the amount of any secure Creditors Who Have Claim  Current value of the entire property? \$700.00  Describe the nature of y (such as fee simple, ten a life estate), if known.  Check if this is com (see instructions)  n, such as local	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own? \$700.0  rour ownership interest ancy by the entireties, c

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 2

Part 2: Describe Your Vehicles

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Debtor 1 Debtor 2	Carmen L. Constantinople, Donna M. Constantinople		Case number (if known)	
. Cars, v	ans, trucks, tractors, sport utility	vehicles, motorcycles		
□ No				
■ Yes				
	del: Rogue ar: 2018 proximate mileage: 16,500 er information:	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
		☐ Check if this is community property (see instructions)	\$12,945.00	\$12,945.00
	del: Rogue ar: 2016 proximate mileage: 39,000 per information:	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
		☐ Check if this is community property (see instructions)	\$11,017.00	\$11,017.00
	del: Altima	Who has an interest in the property? Check one  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
lea	se - daughter's vehicle	☐ Check if this is community property (see instructions)	\$0.00	\$0.00
■ No □ Yes  Add the pages	es: Boats, trailers, motors, personal value of the portion you of you have attached for Part 2. Write	and other recreational vehicles, other vehicles, a watercraft, fishing vessels, snowmobiles, motorcycle own for all of your entries from Part 2, including a te that number here	accessories	\$23,962.00
	escribe Your Personal and Household wn or have any legal or equitable	Items interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Examp □ No	nold goods and furnishings bles: Major appliances, furniture, line . Describe	ns, china, kitchenware		·
		couch, recliners, coffee table, endtables, la	ımps	\$500.00

Official Form 106A/B Schedule A/B: Property page 3

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	en L. Constantinople, Jr.  a M. Constantinople Case number (if known)	
\$500.00	Family room - sofa, coffee table, lamp Location: 23 Pomona Drive, Barnegat NJ 08005	
\$200.00	Dining room - table, chairs, hutch Location: 23 Pomona Drive, Barnegat NJ 08005	
\$1,000.00	Bedroom (3) - beds, dressers, nightstands, lamps Location: 23 Pomona Drive, Barnegat NJ 08005	
ic collections; electronic devices	isions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music ding cell phones, cameras, media players, games	Electronic Examples  No Yes. D
\$300.00	TV (4), computer Location: 23 Pomona Drive, Barnegat NJ 08005	
oin, or baseball card collections;	ues and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi collections, memorabilia, collectibles	Collectible Examples  No Yes. D
\$300.00	Washer, dryer	
\$300.00	Location: 23 Pomona Drive, Barnegat NJ 08005	
\$300.00 \$1,000.00		
\$1,000.00	Location: 23 Pomona Drive, Barnegat NJ 08005  Location: 23 Pomona Drive, Barnegat NJ 08005  ports and hobbies s, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes cal instruments	
\$1,000.00	Location: 23 Pomona Drive, Barnegat NJ 08005  Location: 23 Pomona Drive, Barnegat NJ 08005  ports and hobbies s, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes cal instruments  e	Examples  ■ No □ Yes. D  0. Firearms
\$1,000.00	Location: 23 Pomona Drive, Barnegat NJ 08005  Location: 23 Pomona Drive, Barnegat NJ 08005  ports and hobbies s, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes cal instruments  e  pols, rifles, shotguns, ammunition, and related equipment  e  ryday clothes, furs, leather coats, designer wear, shoes, accessories	Examples  No Yes. D  Firearms Example No Yes. D  Clothes

 $\square$  No

Yes. Describe.....

page 4

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Debtor 1 Debtor 2	Donna M. Constantinople	Case number (if kn	own)
	bracelet, watch	g ring, engagement ring, gold chain, gold ona Drive, Barnegat NJ 08005	\$5,000.00
Examp ■ No —	rm animals  bles: Dogs, cats, birds, horses  Describe		
■ No	her personal and household items you Give specific information	u did not already list, including any health aids you did not li	st
	he dollar value of all of your entries fr art 3. Write that number here	om Part 3, including any entries for pages you have attached	\$9,100.00
Part 4: Des	scribe Your Financial Assets		
Do you ow	vn or have any legal or equitable intere	est in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	oles: Money you have in your wallet, in yo	our home, in a safe deposit box, and on hand when you file your	petition
Examp		al accounts; certificates of deposit; shares in credit unions, broker counts with the same institution, list each.	age houses, and other similar
□ No ■ Yes		Institution name:	
	17.1.	PNC	\$200.00
	17.2.	Wells Fargo	\$40.00
	, mutual funds, or publicly traded stocoles: Bond funds, investment accounts w	cks ith brokerage firms, money market accounts	
_	Institution or is	ssuer name:	
	Prudential		\$2,400.00
joint ve ■ No		corporated and unincorporated businesses, including an int	erest in an LLC, partnership, and
Negotia	iable instruments include personal check	negotiable and non-negotiable instruments s, cashiers' checks, promissory notes, and money orders. not transfer to someone by signing or delivering them.	
	Give specific information about them Issuer name:		

Official Form 106A/B

Cas	e 19-24822-CMG Doc 1 Filed 07/31/19 Entered 07/31/19 11:47: Document Page 15 of 61	09 Desc Main
	armen L. Constantinople, Jr. onna M. Constantinople Case number (if known)	
Examples: ■ No	t or pension accounts Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing each account separately.	plans
Your share Examples: ■ No	Type of account: Institution name:  eposits and prepayments of all unused deposits you have made so that you may continue service or use from a company Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications compa	nies, or others
☐ Yes	Institution name or individual:	
23. Annuities ( No Yes	A contract for a periodic payment of money to you, either for life or for a number of years)  Issuer name and description.	
26 U.S.C. §9 No Yes  25. Trusts, equ	an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition pr \$530(b)(1), 529A(b), and 529(b)(1).  Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c) aitable or future interests in property (other than anything listed in line 1), and rights or powers ex especific information about them	):
	Colorado - two lots - San Luis Rio	\$0.00
	Estate of Joseph Catrambone (joint heirs are debtor and Joseph Catrambone) a. SLVR Unit C, Block 6 Lot 15 (parcel 70303690) b. SLVR Unit C, Block 6 Lot 16 (parcel 70303700) total value \$2,000.00	\$0.00
	Block 7043, Lot 3 & 5, Buena Vista Township, NJ \$1,000.00 - subject to lien Block 1105, Lot 13, Buena Vista Township, NJ \$1,000.00 - subject to lien Block 1005, Lot 14, Buena Vista Township, NJ \$1,000.00 - subject to lien Block 1902, Lot 7, Buena Vista Township, NJ \$1,000.00 - subject to lien (joint heirs are debtor and brother)	\$0.00
Examples:  No	opyrights, trademarks, trade secrets, and other intellectual property Internet domain names, websites, proceeds from royalties and licensing agreements e specific information about them	

27. **Licenses, franchises, and other general intangibles** *Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1 Carmen L. Constantinople, Jr. Debtor 2 Donna M. Constantinople Case number (if known),	n)
28. Tax refunds owed to you  ■ No □ Yes. Give specific information about them, including whether you already filed the returns and the tax years	
<ul> <li>29. Family support         Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, propert         ■ No         □ Yes. Give specific information     </li> </ul>	ty settlement
30. Other amounts someone owes you  Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' composite benefits; unpaid loans you made to someone else  ■ No  □ Yes. Give specific information	ensation, Social Security
31. Interests in insurance policies  Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insura  □ No  ■ Yes. Name the insurance company of each policy and list its value.	ance
Company name: Beneficiary:	Surrender or refund value:
Term only	\$0.00
Term only	\$0.00
<ul> <li>32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to resomeone has died. ■ No □ Yes. Give specific information</li> </ul>	ceive property because
33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue  ■ No □ Yes. Describe each claim	
34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights t ■ No □ Yes. Describe each claim	to set off claims
35. Any financial assets you did not already list  ■ No □ Yes. Give specific information	
36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$2,640.00
Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

☐ Yes. Go to line 38.

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Carmen L. Constantinople, Jr.

Debtor 1	1 Carmen L. Constantinople, Jr.	-		
Debtor 2	2 Donna M. Constantinople		Case number (if known)	
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You of If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>Do</b> y	you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
<b>■</b> N	No. Go to Part 7.			
	Yes. Go to line 47.			
	<u></u>			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
Exa	you have other property of any kind you did not already list?  amples: Season tickets, country club membership  o es. Give specific information			
54. <b>Ad</b>	dd the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Pa</b>	rrt 1: Total real estate, line 2			\$211,400.00
56. <b>Pa</b>	art 2: Total vehicles, line 5	\$23,962.00	_	· · · · · ·
57. <b>Pa</b>	art 3: Total personal and household items, line 15	\$9,100.00		
58. <b>Pa</b>	art 4: Total financial assets, line 36	\$2,640.00		
59. <b>Pa</b>	art 5: Total business-related property, line 45	\$0.00		
60. <b>Pa</b>	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Pa</b>	ert 7: Total other property not listed, line 54 +	\$0.00		
62. <b>To</b>	otal personal property. Add lines 56 through 61	\$35,702.00	Copy personal property total	\$35,702.00
63. <b>To</b>	otal of all property on Schedule A/B. Add line 55 + line 62			\$247 102 00

Official Form 106A/B Schedule A/B: Property page 8

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Fill in this information to identify your case:						
Debtor 1	Carmen L. Consta					
	First Name	Middle Name	Last Name			
Debtor 2	Donna M. Consta	ntinople				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JER	SEY			
Case number _						
(if known)					☐ Check if this is an	
					amended filing	

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	Identify the Property You Claim as E	xempt							
1.	Which set of exemptions are you claiming	hich set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che						
	23 Pomona Drive Barnegat, NJ 08005 Ocean County	\$210,000.00	•	\$50,300.00	11 U.S.C. § 522(d)(1)				
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	890 Harding Highway Buena, NJ	\$700.00		\$0.00	11 U.S.C. § 522(d)(1)				
	08310 Atlantic County Block 1403, Lot 5 jointly owned with debtor's deceased father Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit					
					44.11.0.0.0.500(.0/4)				
	890 Harding Highway Buena, NJ 08310 Atlantic County	\$700.00		\$0.00	11 U.S.C. § 522(d)(1)				
	Block 1403, Lot 9 jointly owned with debtor's deceased father Line from <i>Schedule A/B</i> : 1.3			100% of fair market value, up to any applicable statutory limit					
	Living room - couch, recliners, coffee table, endtables, lamps	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Location: 23 Pomona Drive, Barnegat NJ 08005			100% of fair market value, up to any applicable statutory limit					

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Debtor 1 Donna M. Constantinople Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Family room - sofa, coffee table, 11 U.S.C. § 522(d)(3) \$500.00 \$500.00 Location: 23 Pomona Drive, Barnegat 100% of fair market value, up to NJ 08005 any applicable statutory limit Line from Schedule A/B: 6.2 Dining room - table, chairs, hutch 11 U.S.C. § 522(d)(3) \$200.00 \$200.00 Location: 23 Pomona Drive, Barnegat NJ 08005 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 6.3 Bedroom (3) - beds, dressers, 11 U.S.C. § 522(d)(3) \$1,000.00 \$1,000.00 nightstands, lamps Location: 23 Pomona Drive, Barnegat 100% of fair market value, up to NJ 08005 any applicable statutory limit Line from Schedule A/B: 6.4 TV (4), computer 11 U.S.C. § 522(d)(3) \$300.00 \$300.00 Location: 23 Pomona Drive, Barnegat NJ 08005 100% of fair market value, up to Line from Schedule A/B: 7.1 any applicable statutory limit Washer, dryer 11 U.S.C. § 522(d)(3) \$300.00 \$300.00 Location: 23 Pomona Drive, Barnegat NJ 08005 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 8.1 Location: 23 Pomona Drive, Barnegat 11 U.S.C. § 522(d)(3) \$1,000.00 \$1,000.00 NJ 08005 Line from Schedule A/B: 8.2 100% of fair market value, up to any applicable statutory limit Location: 23 Pomona Drive, Barnegat 11 U.S.C. § 522(d)(3) \$300.00 \$300.00 NJ 08005 Line from Schedule A/B: 11.1 П 100% of fair market value, up to any applicable statutory limit Costume, wedding ring, engagement 11 U.S.C. § 522(d)(4) \$5,000.00 \$3,400.00 ring, gold chain, gold bracelet, watch Location: 23 Pomona Drive, Barnegat 100% of fair market value, up to NJ 08005 any applicable statutory limit Line from Schedule A/B: 12.1 **PNC** 11 U.S.C. § 522(d)(5) \$200.00 \$200.00 Line from Schedule A/B: 17.1 П 100% of fair market value, up to any applicable statutory limit Wells Fargo 11 U.S.C. § 522(d)(5) \$40.00 \$40.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Prudential** 11 U.S.C. § 522(d)(5) \$2,400.00 \$2,400.00 Line from Schedule A/B: 18.1 100% of fair market value, up to any applicable statutory limit

Carmen L. Constantinople, Jr.

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Debtor 2	Donna M. Constantinople			Case number (if known)	
	f description of the property and line on edule A/B that lists this property	Current value of the portion you own	Am	Specific laws that allow exemption	
		Copy the value from Check only one box for each exemption. Schedule A/B			
	lorado - two lots - San Luis Rio	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	ate of Joseph Catrambone (joint rs are debtor and Joseph	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
Cat a. \$ (pa b. \$ (pa tota	trambone) SLVR Unit C, Block 6 Lot 15 rcel 70303690) SLVR Unit C, Block 6 Lot 16 rcel 70303700) al value \$2,000.00 e from Schedule A/B: 25.2			100% of fair market value, up to any applicable statutory limit	
	rm only e from Schedule A/B: 31.1	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
LITE	e Hotti Schedule A/B. 31.1			100% of fair market value, up to any applicable statutory limit	
	rm only e from Schedule A/B: 31.2	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
LIII	SHOIL SUITEGUIE A/D. 31.2			100% of fair market value, up to any applicable statutory limit	
	you claiming a homestead exemption bject to adjustment on 4/01/22 and every No  Yes. Did you acquire the property cover.	3 years after that for ca	ises fi		

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			Document Pa	ge 21 (	of 61		
Fill	in this inforn	nation to identify you					
Deb	tor 1	Carmen L. Cons	stantinople, Jr.				
		First Name	Middle Name Last	Name			
Deb	tor 2	Donna M. Const	tantinople				
(Spot	use if, filing)	First Name	•	Name			
Unit	ed States Bar	nkruptcy Court for the:	DISTRICT OF NEW JERSEY				
Cas	e number						
(if kno	own)					☐ Check	if this is an
						ameno	ded filing
Off.	cial Form	<u>า 106D</u>					
Sc	hedule	D: Creditors	Who Have Claims Sec	cured	by Propert	V	12/15
					<u> </u>		
			If two married people are filing together, bo out, number the entries, and attach it to this				
	er (if known).	Additional Lage, Illi It	out, number the entires, and attach it to this		the top of any addition	nai pages, write your na	nie and case
1. Do	any creditors	have claims secured by	your property?				
	□No Check	this box and submit t	his form to the court with your other sche	dules You	ı have nothing else t	o report on this form	
	_			uu.00. 10.	a navo notimig oloo t	o roport ou tino torrii.	
	Yes. Fill in	all of the information	below.				
Par	List Al	I Secured Claims					
			more than one secured claim, list the creditor s		Column A	Column B	Column C
			a particular claim, list the other creditors in Pa cal order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	,	·			value of collateral.	claim	If any
2.1		ta Township			\$128.00	\$700.00	\$0.00
	Tax Collec		Describe the property that secures the cla		\$120.00	\$700.00	\$0.00
	Creditor's Name	•	890 Harding Highway Buena, NJ				
			08310 Atlantic County				
			Block 1403, Lot 5 jointly owned with debtor's				
			deceased father				
			As of the date you file, the claim is: Check	all that			
		ng Highway	apply.				
	Buena, NJ	0 08310	☐ Contingent				
	Number, Street,	City, State & Zip Code	Unliquidated				
			☐ Disputed				
Who	owes the de	bt? Check one.	Nature of lien. Check all that apply.				
_	ebtor 1 only		An agreement you made (such as mortga	age or secu	red		
	ebtor 2 only		car loan)				
	ebtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, mechanic	's lien)			
П	t least one of th	ne debtors and another	☐ Judgment lien from a lawsuit				

☐ Other (including a right to offset)

Last 4 digits of account number

☐ Check if this claim relates to a

community debt

Date debt was incurred \_\_\_

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Debte	or 1 Carmen L. Constantine		Case number (if known)		
Daha	First Name Middle				
Depto	or 2 Donna M. Constantino First Name Middle				
	i list valle made	Name Last Name			
	Buena Vista Township		•		
2.2	Tax Collector	Describe the property that secures the claim:	\$125.00	\$700.00	\$0.00
	Creditor's Name	890 Harding Highway Buena, NJ			
		08310 Atlantic County			
		Block 1403, Lot 9			
		jointly owned with debtor's			
		deceased father  As of the date you file, the claim is: Check all that			
	890 Harding Highway	apply.			
_	Buena, NJ 08310	☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
	ebtor 1 only	An agreement you made (such as mortgage or	secured		
☐ De	ebtor 2 only	car loan)			
■ De	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
☐ At	least one of the debtors and another	☐ Judgment lien from a lawsuit			
	heck if this claim relates to a	Other (including a right to offset)			
C	ommunity debt				
Date	debt was incurred	Last 4 digits of account number			
2.3	Nissan Motor		<b>*</b> 0.00	<b>\$40.045.00</b>	<b>*</b> 0.00
	Acceptance	Describe the property that secures the claim:	<b>\$0.00</b>	\$12,945.00	\$0.00
	Creditor's Name	2018 Nissan Rogue 16,500 miles			
		lease			
	PO Box 660360	As of the date you file, the claim is: Check all that			
	Dallas, TX 75266	apply.			
-		Contingent			
	Number, Street, City, State & Zip Code	Unliquidated			
Who	owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
	ebtor 1 only	☐ An agreement you made (such as mortgage or	secured		
	ebtor 2 only	car loan)	JOURIEU		
_	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
	least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
	heck if this claim relates to a	Other (including a right to offset)			
	ommunity debt				
Date 4	debt was incurred	Last 4 digits of account number			
Date (	uebt was illeuiteu				

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Debtor 1 Carmen L. Constantinop		Case number (if known)		
First Name Middle Na				
Debtor 2 Donna M. Constantinop First Name Middle Na				
r iist Name iviidale Ne	Last Name			
2.4 Nissan Motor		40.00	044.047.00	40.00
Acceptance	Describe the property that secures the claim:	<b>\$0.00</b>	\$11,017.00	\$0.00
Creditor's Name	2016 Nissan Rogue 39,000 miles			
	lease			
PO Box 660360	As of the date you file, the claim is: Check all that apply.	•		
Dallas, TX 75266	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.5 Nissan Motor	Describe the property that secures the claim:	\$0.00	\$0.00	\$0.00
Acceptance Creditor's Name	2017 Nissan Altima	1		Ψ0.00
	lease - daughter's vehicle			
	_			
PO Box 660360	As of the date you file, the claim is: Check all that apply.			
Dallas, TX 75266	☐ Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt2 Obselvers	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage or scar loan)	securea		
	☐ Statutory lien (such as tax lien, mechanic's lien)			
■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.6 PNC Bank	Describe the property that secures the claim:	\$88,000.00	\$210,000.00	\$0.00
Creditor's Name	23 Pomona Drive Barnegat, NJ			· ·
	08005 Ocean County			
400 Ballarian Ball	As of the date you file, the claim is: Check all that	I		
103 Bellevue Parkway Wilmington, DE 19809	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				_
Date debt was incurred	Last 4 digits of account number			

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Deb	otor 1	Carmen L. Consta	ntinople, Jr.		Case number (if known)		
		First Name	Middle Name	Last Name			
Deb	otor 2						
		First Name	Middle Name	Last Name			
2.7	PN	C Bank	Describe	e the property that secures the claim:	\$40,078.00	\$210,000.00	\$0.00
	Cred	itor's Name	23 Por	nona Drive Barnegat, NJ			
			08005	Ocean County			
		B Bellevue Parkway mington, DE 19809	As of the apply.	e date you file, the claim is: Check all that	_J t		
	Numl	ber, Street, City, State & Zip Co					
Wh	o owe	s the debt? Check one.	☐ Dispu Nature (	uted of lien. Check all that apply.			
_	Debtor Debtor	•	☐ An ag car l	greement you made (such as mortgage or oan)	r secured		
	Debtor	1 and Debtor 2 only	☐ Statu	tory lien (such as tax lien, mechanic's lier	1)		
	At least	t one of the debtors and an	other 🗖 Judgi	ment lien from a lawsuit			
		if this claim relates to a nunity debt	☐ Other	r (including a right to offset)			
Date	e debt	was incurred	L	ast 4 digits of account number			
					<b>A400</b> 001		
		•		on this page. Write that number here:	\$128,331.	00	
		tne last page of your for	iii, add the dollar	value totals from all pages.	\$128,331.	00	

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 25 01	V- <u> </u>	_	
Fill in this i	nformation to identify your ca	se:				
Debtor 1	Carmen L. Constan	tinonlo Ir				
DODIOI 1	First Name	Middle Name	Last Name			
Debtor 2	Donna M. Constant	inople				
(Spouse if, filing		Middle Name	Last Name			
United State	es Bankruptcy Court for the:	DISTRICT OF NEW JERSI	EY			
Case number	er				_	if this is an
					] amend	ed filing
Official F	orm 106E/F					
	le E/F: Creditors Wh	o Havo Uneocur	nd Claime			12/15
	te and accurate as possible. Use					
eft. Attach th name and cas	Creditors Who Have Claims Secure e Continuation Page to this page. se number (if known).	If you have no information to				
	ist All of Your PRIORITY Unse					
	reditors have priority unsecured of	rlaime anainet vou?				
		ciainis against you:				
□ No. G	to to Part 2.	ziainis against you:				
□ No. G ■ Yes.	to to Part 2.	<b>5</b> ,	priority unsecured claim	liet the creditor congretate	alv for each claim. For	each claim listed
Yes.  List all o identify w possible, Part 1. If		If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credit	iounts, list that claim here e. If you have more than ors in Part 3.	e and show both priority a two priority unsecured cl	and nonpriority amount aims, fill out the Contir	ts. As much as nuation Page of
☐ No. G  ☐ Yes.  2. List all o identify w possible, Part 1. If	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credit	iounts, list that claim her e. If you have more than ors in Part 3.	e and show both priority a two priority unsecured cl	and nonpriority amount	ts. As much as
☐ No. G ☐ Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credit	iounts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.	e and show both priority a two priority unsecured cl	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. In that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a particular xplanation of each type of claim, see the particular type of claim type of claim, see the particular type of claim the particular type of claim to the particular type of claim type o	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.	e and show both priority a two priority unsecured cl Total claim	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G Yes.  List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name  Box 9012	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.	e and show both priority a two priority unsecured cl Total claim	and nonpriority amount aims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority
☐ No. G ☐ Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. In that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a particular xplanation of each type of claim, see the particular type of claim type of claim, see the particular type of claim the particular type of claim to the particular type of claim type o	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credit to the instructions for this form in Last 4 digits of ac	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.	Total claim \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
☐ No. G ☐ Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name  Box 9012  Itzville, NY	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credit to the instructions for this form in Last 4 digits of ac	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  ot incurred?	Total claim \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G  Yes.  List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name  Box 9012  Itzville, NY  aber Street City State Zip Code	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credit to the instructions for this form in  Last 4 digits of ac  When was the detention of the date you	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  ot incurred?	Total claim \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G  Yes.  2. List all o identify w possible, Part 1. If (For an e  2.1 Interprior PO  Hol Num  Who in □ Deb	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name  Box 9012  Itzville, NY  ber Street City State Zip Code curred the debt? Check one.	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in  Last 4 digits of ac  When was the det  As of the date you  Contingent Unliquidated	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  ot incurred?	Total claim \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
□ No. G □ Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name Box 9012 Itzville, NY Inher Street City State Zip Code curred the debt? Check one.	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in  Last 4 digits of ac  When was the det  As of the date you  Contingent Unliquidated Disputed	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  ot incurred?	Total claim \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
□ No. G □ Yes.  2. List all o identify w possible, Part 1. If (For an e  2.1 Interprior PO Hole Num Who in □ Deb □ Deb	f your priority unsecured claims. I hat type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name Box 9012 Itzville, NY Interest City State Zip Code curred the debt? Check one. Itor 1 only Itor 2 only Itor 1 and Debtor 2 only	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in  Last 4 digits of ac  When was the det  As of the date you  Contingent Unliquidated Disputed Type of PRIORITY	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  of incurred?  I file, the claim is: Checklet.	Total claim \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name  Box 9012  Itzville, NY  Iber Street City State Zip Code curred the debt? Check one.  tor 1 only  tor 2 only  tor 1 and Debtor 2 only  east one of the debtors and another	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in  Last 4 digits of ac  When was the det  As of the date you  Contingent Unliquidated Disputed Type of PRIORITY Domestic suppo	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  of incurred?  I file, the claim is: Checklet.  Tunsecured claim:  ort obligations	Total claim  \$746.00  k all that apply	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name Box 9012 Itzville, NY aber Street City State Zip Code curred the debt? Check one. tor 1 only tor 2 only that one of the debtors and another ck if this claim is for a community.	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in Last 4 digits of ac When was the det As of the date you Contingent Unliquidated Disputed Type of PRIORITY Domestic support y debt Taxes and certain	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  of incurred?  I file, the claim is: Checker  ort obligations ain other debts you owe the	Total claim  Total claim  \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
□ No. G □ Yes.  2. List all o identify w possible, Part 1. If (For an ell of Prior)  2.1 Interprior   Interprior   PO Hol Num Who in □ Deb □ Deb □ At leter   Chee Is the content of the Ister of the I	f your priority unsecured claims. I that type of claim it is. If a claim has list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name  Box 9012  Itzville, NY  Iber Street City State Zip Code curred the debt? Check one.  tor 1 only  tor 2 only  tor 1 and Debtor 2 only  east one of the debtors and another	If a creditor has more than one both priority and nonpriority am according to the creditor's nameular claim, list the other credite the instructions for this form in Last 4 digits of ac When was the detection with the work of the date you Contingent Unliquidated Disputed Type of PRIORITY Domestic support y debt Taxes and certain Claims for death	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  of incurred?  I file, the claim is: Checklet.  Tunsecured claim:  ort obligations	Total claim  Total claim  \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G Yes.  2. List all o identify w possible, Part 1. If (For an e	f your priority unsecured claims. I hat type of claim it is. If a claim has I list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name Box 9012 Itzville, NY liber Street City State Zip Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors and another ck if this claim is for a community laim subject to offset?	If a creditor has more than one both priority and nonpriority am according to the creditor's nam cular claim, list the other credite the instructions for this form in Last 4 digits of ac When was the det As of the date you Contingent Unliquidated Disputed Type of PRIORITY Domestic support y debt Taxes and certain	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  of incurred?  I file, the claim is: Checker  ort obligations ain other debts you owe the	Total claim  Total claim  \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G Yes.  2. List all o identify w possible, Part 1. If (For an e  2.1 Interprior PO Hol Num Who in Deb Deb At le Is the c No	f your priority unsecured claims. I hat type of claim it is. If a claim has I list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name Box 9012 Itzville, NY liber Street City State Zip Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors and another ck if this claim is for a community laim subject to offset?	If a creditor has more than one both priority and nonpriority am according to the creditor's nameular claim, list the other credite the instructions for this form in Last 4 digits of ac When was the detection with the work of the date you Contingent Unliquidated Disputed Type of PRIORITY Domestic support y debt Taxes and certain Claims for death	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  of incurred?  I file, the claim is: Check of the count obligations ain other debts you owe to the or personal injury while	Total claim  Total claim  \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority
No. G Yes.  2. List all o identify w possible, Part 1. If (For an e  2.1 Interpretation PO Hole Num Who in Deb Deb At let Is the c Is the c	f your priority unsecured claims. I hat type of claim it is. If a claim has I list the claims in alphabetical order a more than one creditor holds a partic xplanation of each type of claim, see ernal Revenue Service rity Creditor's Name Box 9012 Itzville, NY liber Street City State Zip Code curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors and another ck if this claim is for a community laim subject to offset?	If a creditor has more than one both priority and nonpriority am according to the creditor's nameular claim, list the other credite the instructions for this form in Last 4 digits of ac When was the det When was the det Gontingent Unliquidated Disputed Type of PRIORITY Domestic support Claims for death Claims for death Claims for death	counts, list that claim here. If you have more than ors in Part 3.  In the instruction booklet.  count number  of incurred?  I file, the claim is: Check of the count obligations ain other debts you owe to the or personal injury while	Total claim  Total claim  \$746.00	and nonpriority amount aims, fill out the Contir Priority amount	Nonpriority

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

**Total claim** 

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	Donna M. Constantinople	Case number (if known)	
4.1	ADS/Comenity/Jared	Last 4 digits of account number 8850	\$741.00
	Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218	When was the debt incurred?	ψ/41.00
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	ADS/Comenity/Ulta	Last 4 digits of account number 6817	\$2,181.00
	Nonpriority Creditor's Name PO Box 182789	When was the debt incurred?	
	Columbus, OH 43218  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.3	ADS/Comenity/Victorias Secret	Last 4 digits of account number 5637	\$654.00
	Nonpriority Creditor's Name PO Box 182789	When was the debt incurred?	•
	Columbus, OH 43218  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent	
		Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debto	2 Donna M. Constantinople	Case number (if known)	
4.4	American Express	Last 4 digits of account number 7481	\$982.00
	Nonpriority Creditor's Name PO Box 8218 Mason, OH 45040	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.5	Bank of America	Last 4 digits of account number 6428,1307,	\$12,027.00
	Nonpriority Creditor's Name PO Box 982238 EI Paso, TX 79998	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Capital One	Last 4 digits of account number 7805	\$8,224.00
	Nonpriority Creditor's Name PO Box 30285 Solt Lake City LLT 84130	When was the debt incurred?	
	Salt Lake City, UT 84130  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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	2 Donna M. Constantinople	Case number (if known)	
4.7	CBNA	Last 4 digits of account number 6939,2582	\$3,696.00
	Nonpriority Creditor's Name PO Box 6497	When was the debt incurred?	40,000.00
	Sioux Falls, SD 57117  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		8555,6684,8	
4.8	Chase	Last 4 digits of account number 555	\$4,655.00
	Nonpriority Creditor's Name PO Box 15369 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.9	Comenity - HSN	Last 4 digits of account number 8097	\$1,179.00
	Nonpriority Creditor's Name PO Box 659707 San Antonio, TX 78265-9707	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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	Donna M. Constantinople		Case number (if known)	
4.1	Discover	Last 4 digits of account number	1100,1129,1 100	\$13,389.00
	Nonpriority Creditor's Name PO Box 15316	When was the debt incurred?		
	Wilmington, DE 19850  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
4.1	Home Depot	Last 4 digits of account number	3532	\$1,087.00
	Nonpriority Creditor's Name PO Box 6497	When was the debt incurred?		
	Sioux Falls, SD 57117  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		
4.1	Kohls	Last 4 digits of account number	9305	\$2,363.00
	Nonpriority Creditor's Name PO Box 3115	When was the debt incurred?		
	Milwaukee, WI 53201  Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	,	or o	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		

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		<b>.</b> .
Macys	Last 4 digits of account number	\$699.00
Nonpriority Creditor's Name PO Box 8218 Mason, OH 45040	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
PNC Bank	Last 4 digits of account number 1008	\$1,636.00
Nonpriority Creditor's Name PO Box 3180 Pittsburgh, PA 15230	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Sears	Last 4 digits of account number 4994,2107	\$3,097.00
Nonpriority Creditor's Name		. ,
PO Box 6217	When was the debt incurred?	
Sioux Falls, SD 57117  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify	

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Syncb/Amazon	Last 4 digits of account number 4578	\$1,132.00
Nonpriority Creditor's Name PO Box 965015 Orlando, FL 32896	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?  No	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
⊒ No □ Yes	Other. Specify	
Syncb/Evine	Last 4 digits of account number 4577	\$408.00
Nonpriority Creditor's Name PO Box 965005	When was the debt incurred?	·
Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Syncb/Lowe's	Last 4 digits of account number 8192	\$747.00
Nonpriority Creditor's Name PO Box 965005 Orlando, FL 32896	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
☐ Check if this claim is for a community debt sthe claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify	

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Synchrony Bank/TJX	Last 4 digits of account number 4366	\$1,264.00
Nonpriority Creditor's Name PO Box 965015 Orlando, FL 32896	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
Synchrony Bank/Walmart	Last 4 digits of account number 3914	\$1,146.00
Nonpriority Creditor's Name PO Box 965024 Orlando, FL 32896	When was the debt incurred?	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
TD Bank	Last 4 digits of account number 3950	\$2,072.00
Nonpriority Creditor's Name PO Box 84037	When was the debt incurred?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Columbus, GA 31908		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.  ☐ Debtor 1 only	-	
Debtor 2 only	☐ Contingent	
Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
■ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	

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Vonnriority C	Target Credit	Last 4 digits of account number	1786		\$8,116.0
PO Box 6	Creditor's Name	When was the debt incurred?			
	olis, MN 55440	when was the dept incurred?			-
	eet City State Zip Code	As of the date you file, the claim	is: Check	all that apply	
Who incurre	ed the debt? Check one.				
Debtor 1	only	☐ Contingent			
Debtor 2	only	☐ Unliquidated			
Debtor 1	and Debtor 2 only	☐ Disputed			
☐ At least o	one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
☐ Check if	this claim is for a community	☐ Student loans			
debt	subject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you did not	
■ No		Debts to pension or profit-sharir	na nlans	and other similar debts	
■ NO □ Yes					
→ Yes		Other. Specify			-
	aymour & Flanigan	Last 4 digits of account number	0610		\$964.0
10000 Ma	Creditor's Name	When was the debt incurred?			-
	NJ 07430 eet City State Zip Code	As of the date you file, the claim	is: Check	all that apply	
	ed the debt? Check one.	•		,	
Debtor 1	only	☐ Contingent			
Debtor 2	only	☐ Unliquidated			
Debtor 1	and Debtor 2 only	Disputed			
	one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	this claim is for a community	☐ Student loans			
debt	subject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or divorce that you did not	
■ No	•	☐ Debts to pension or profit-sharir	ng plans.	and other similar debts	
□ Yes					
	ers to Be Notified About a Deb	t That You Already Listed	ou alrea	dy listed in Parts 1 or 2. For exam	ole, if a collection age
	from you for a debt you owe to sor he creditor for any of the debts that	neone else, list the original creditor ir you listed in Parts 1 or 2, list the add	Parts 1	or 2, then list the collection agenc	y here. Similarly, if y
ng to collect to nore than one d for any det		secured Claim ns. This information is for statistical r	eporting	purposes only. 28 U.S.C. §159. Ad	d the amounts for ea
Add the amounts f unsecured	Amounts for Each Type of Union of certain types of unsecured claim.			Total Claim	
Add the amounts funsecured	Amounts for Each Type of Uno		<b>eporting</b> 6a.		
g to collect to orre than one of for any detailed.  Add the he amounts of unsecured of the detailed.	Amounts for Each Type of Unit of certain types of unsecured clair claim.	ns. This information is for statistical r	6a.	Total Claim \$ 0.00	
ag to collect to collect the collect that one of the collect that one of the collect that t	Amounts for Each Type of Unit of certain types of unsecured clair claim.  Sa. Domestic support obligations  Sb. Taxes and certain other debts	ns. This information is for statistical r	6a. 6b.	Total Claim \$ 0.00 \$ 746.00	
g to collect to order than one of for any dek  Add the he amounts for unsecured of the following for t	Amounts for Each Type of Unit of certain types of unsecured claim.  Sa. Domestic support obligations  Sb. Taxes and certain other debts  Cc. Claims for death or personal in	ns. This information is for statistical r you owe the government njury while you were intoxicated	6a. 6b. 6c.	* Total Claim  \$ 0.00  \$ 746.00  \$ 0.00	
g to collect to order than one of for any dek  Add the he amounts for unsecured of the following for t	Amounts for Each Type of Unit of certain types of unsecured claim.  Sa. Domestic support obligations  Sb. Taxes and certain other debts  Cc. Claims for death or personal in	ns. This information is for statistical r	6a. 6b.	Total Claim \$ 0.00 \$ 746.00	
ag to collect to collect the collect that one deformany details and the collect the collect that the collect	Amounts for Each Type of Unit of certain types of unsecured claim.  Sa. Domestic support obligations  Sb. Taxes and certain other debts  Cc. Claims for death or personal in	ns. This information is for statistical r you owe the government njury while you were intoxicated ecured claims. Write that amount here.	6a. 6b. 6c.	* Total Claim  \$ 0.00  \$ 746.00  \$ 0.00	
g to collect to ore than one of for any det  Add the he amounts funsecured of the form of	Amounts for Each Type of Unit of certain types of unsecured clair claim.  6a. Domestic support obligations 6b. Taxes and certain other debts 6c. Claims for death or personal in 6d. Other. Add all other priority unse	ns. This information is for statistical r you owe the government njury while you were intoxicated ecured claims. Write that amount here.	6a. 6b. 6c. 6d.	Total Claim  \$ 0.00  \$ 746.00 \$ 0.00	
g to collect to ore than one of for any det  Add the he amounts funsecured of the form of	Amounts for Each Type of Unit of certain types of unsecured clair claim.  6a. Domestic support obligations 6b. Taxes and certain other debts 6c. Claims for death or personal in other. Add all other priority unsecue. 6c. Total Priority. Add lines 6a thro	ns. This information is for statistical r you owe the government njury while you were intoxicated ecured claims. Write that amount here.	6a. 6b. 6c. 6d.	Total Claim  \$ 0.00  \$ 746.00 \$ 0.00 \$ 746.00	
Add the the amounts funsecured of 66	Amounts for Each Type of Unit of certain types of unsecured clair claim.  6a. Domestic support obligations 6b. Taxes and certain other debts 6c. Claims for death or personal in other. Add all other priority unsecue. 6c. Total Priority. Add lines 6a thro	ns. This information is for statistical r you owe the government njury while you were intoxicated ecured claims. Write that amount here.	6a. 6b. 6c. 6d.	Total Claim  \$ 0.00  \$ 746.00 \$ 0.00 \$ 0.00  \$ Total Claim	

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Debtor 2 Carmen L. Constantinople, Jr.
Debtor 2 Case number (if known)

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

Case number (if known)

6h. \$ 0.00

6i. \$ 72,459.00

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Fill in this infor	mation to identify your	case:					
Debtor 1	Carmen L. Constantinople, Jr.						
	First Name	Middle Name	Last Name				
Debtor 2	Donna M. Consta	nna M. Constantinople					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF NEW JEE	RSEY				
Case number							
(if known)							

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code			e contract or lease Code	State what the contract or lease is for		
2.1							
	Name						
	Number	Street			<u> </u>		
	City		State	ZIP Code	<u> </u>		
2.2							
	Name						
	Number	Street					
	City		State	ZIP Code	<u> </u>		
2.3	City		State	ZIF Code			
2.0	Name				_		
	Number	Street			_		
	City		State	ZIP Code	<del>_</del>		
2.4							
	Name				_		
	Number	Street			_		
	City		State	ZIP Code	_		
2.5	City		Olalo	Zii Oodo			
	Name				_		
	Number	Street			_		
	City		State	ZIP Code	_		

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		Docume	ent Page 36 C	101	
Fill in thi	s information to identify y	our case:			
Dabtand	0				
Debtor 1	Carmen L. Co				
Debtor 2		Middle Name	Last Name		
(Spouse if, f	Donna M. Cor	Middle Name	Last Name		
(Opodoo II, I	g)	made Hame	<u> </u>		
United St	ates Bankruptcy Court for th	ne: DISTRICT OF NEW JE	RSEY		
_					
Case nur	mber			Charle	:f +b:= := ===
(II KIIOWII)				<u> </u>	if this is an ed filing
				amend	ea ming
Official	J Form 106H				
	al Form 106H				
Sche	dule H: Your Co	odebtors			12/15
	you have any codebtors?	ewn). Answer every question? (If you are filing a joint case,		as a codebtor.	
Arizo	na, California, Idaho, Louisi o. Go to line 3.	you lived in a community p ana, Nevada, New Mexico, Po spouse, or legal equivalent liv	uerto Rico, Texas, Wash	y? (Community property states and territor ington, and Wisconsin.)	ies include
in lin Form	ne 2 again as a codebtor on 106D), Schedule E/F (Off Column 2.  Column 1: Your codebtor	nly if that person is a guarai icial Form 106E/F), or Sched	ntor or cosigner. Make	if your spouse is filing with you. List the sure you have listed the creditor on ScheG). Use Schedule D, Schedule E/F, or Schedule 2: The creditor to whom yo	nedule D (Official Schedule G to fill
	Name, Number, Street, City, State a	and ZIP Code		Check all schedules that apply:	
				<b>-</b>	
3.1	Name			Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			<u> </u>	
	City	State	ZIP Code		
				_	
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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						•			
	in this information to identify your cotor 1  Carmen L. C	ase: Constantinople, Jr.							
		onstantinople			_				
` .	ited States Bankruptcy Court for the	: DISTRICT OF NEW J	IERSEY						
	se number 		-			Check if this is  An amend  A supplem  13 income	ed filing ent showir	ng postpetition	
0	fficial Form 106I					MM / DD/	YYYY	-	
S	chedule I: Your Inc	ome				,,			12/15
spo atta Pa	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  The describe Employment Fill in your employment	ır spouse is not filing w	ith you, do not inclu	ıde infor	mati	on about your sp	ouse. If m	ore space is	needed,
1.	information.		Debtor 1			Debtor	2 or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>			■ Emp	loyed employed		
	employers.	Occupation	mortgage origii	nator		unemp	loyed		
	Include part-time, seasonal, or self-employed work.	Employer's name	Bank of Americ	a					
	Occupation may include student or homemaker, if it applies.	Employer's address	Forked River, N	IJ					
		How long employed t	here? 3 years	5					
Pai	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	e space. In	clude your noi	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	on for all	empl	oyers for that pers	on on the I	ines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,056.20	. \$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	4,056.20	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

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	otor 1 otor 2	Carmen L. Constantinople, Jr. Donna M. Constantinople	_	Ca	ase number ( <i>if know</i>	n) _			
				F	For Debtor 1		For Debtor		
	Cop	by line 4 here	4.	\$	4,056.2	0	\$	0.00	-
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	416.9	0	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.0	0	\$	0.00	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	398.1	8	\$	0.00	-
	5d.	Required repayments of retirement fund loans	5d.	\$			\$	0.00	-
	5e.	Insurance	5e.	\$			\$	0.00	-
	5f.	Domestic support obligations	5f.	\$			\$	0.00	-
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h.+	. 9		_	\$ - \$	0.00	-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$		_	ψ	0.00	-
					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Φ		-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,057.6	6	\$	0.00	-
8.	List 8a.	All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	9.0	ď		•	¢.	0.00	
	8b.	monthly net income.  Interest and dividends	8a. 8b.	9	0.0	_	\$ 	0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$			\$	0.00	-
	8d.	Unemployment compensation	8d.	9			\$	0.00	-
	8e.	Social Security	8e.	\$			·		-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.		60.0		\$		-
	8g.	Pension or retirement income	8g.				\$		_
	8h.	Other monthly income. Specify: annualized bonus	8h.+	- \$	51,500.0	0 +	- \$	0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,500.0	0	\$	1,483.00	D
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$		3.557.66 +	\$	1.483.00	= \$	5.040.66
					0,007.00	*-	1,400.00		0,040.00
11.	8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  Cher monthly income. Specify: annualized bonus								
12.		e that amount on the Summary of Schedules and Statistical Summary of Certain						\$	5,040.66
								Combin	ned y income
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						y mcome
		Yes. Explain: debtor's income is generally consistant, but can	vary				_		

Official Form 106l Schedule I: Your Income page 2

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Fill	in this informa	ation to identify yo	onicose.							
						01	1. 26.41.2			
Deb	otor 1	Carmen L. C	onstantii	nople, Jr.		Ch	eck if thi An an	is is: nended filing		
	otor 2	Donna M. Co	onstantin	ople			A sup	plement show	wing postpetition chapter	
(Spo	ouse, if filing)						13 ex	penses as or	the following date:	
Unit	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY			MM /	DD / YYYY		
1	e number nown)									
O	fficial Fo	rm 106J								
S	chedule	J: Your	Exper	ises					12	/1
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	possible. eded, atta ry question	If two married people ar ch another sheet to this	e filing together, bo form. On the top of	oth are eq	ually re	esponsible fo ages, write y	or supplying correct your name and case	
Par 1.	t 1: Desci Is this a joir	ribe Your House	hold							_
••	□ No. Go to									
	Yes. Doe	es Debtor 2 live	in a separa	ate household?						
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expen</i> ses	for Separate House	ehold of De	ebtor 2.			
2.	Do you hay	e dependents?	■ No							
۷.	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		De ag	ependent's je	Does dependent live with you?	
	Do not state dependents								□ No □ Yes	
	•								□ No	
					-				☐ Yes	
									□ No □ Yes	
									□ No	
3.	Do your ox	penses include	_						☐ Yes	
٥.	expenses o	f people other t	han 👝	No Yes						
	yourself an	d your depende	nts?	165						
Est	imate your ex	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		h assistance an		government assistance it luded it on <i>Schedule I:</i> Y				Your exp	enses	
4.	The rental of	or home owners	hip expen	ses for your residence. In	nclude first mortgage	<b>=</b>				
		nd any rent for th			3.3.3.	4.	\$		1,777.00	
	If not include	ded in line 4:								
		estate taxes				4a.			0.00	
	•	erty, homeowner's		's insurance Ipkeep expenses		4b. 4c.			0.00	
		eowner's associat	•			4d.	· · · · · · · ·		0.00 0.00	
5.	Additional i	mortgage paymo	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

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Debtor 1 Debtor 2		L. Constantinople, Jr. I. Constantinople	Case numh	er (if known)				
200101 2	- Dollila IV	i. Oonstantinopie						
6. Uti	lities:							
6a.	Electricity,	heat, natural gas	6a.	\$	350.00			
6b.	Water, sev	wer, garbage collection	6b.	\$	50.00			
6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	430.00			
6d.	Other. Spe	ecify:	6d.	\$	0.00			
7. <b>Fo</b>	od and house	ekeeping supplies	7.	\$	600.00			
		children's education costs	8.	\$	0.00			
9. <b>Cl</b> c	thing, laund	ry, and dry cleaning	9.	\$	100.00			
10. <b>Pe</b> i	rsonal care p	products and services	10.	\$	100.00			
11. <b>Me</b>	dical and de	ntal expenses	11.	\$	0.00			
12. <b>Tra</b>	nsportation.	Include gas, maintenance, bus or train fare.			<del></del>			
	not include ca		12.	\$	0.00			
13. <b>En</b> t	tertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	150.00			
14. Ch	aritable cont	ributions and religious donations	14.	\$	0.00			
-	urance.							
		surance deducted from your pay or included in lines 4 or 2						
	a. Life insura		15a.	·	0.00			
	o. Health ins			\$	0.00			
	c. Vehicle ins			\$	303.00			
		rance. Specify:		\$	0.00			
		clude taxes deducted from your pay or included in lines 4		_				
	ecify:		16.	\$	0.00			
		ease payments:	47-	Φ	225.22			
	, ,	ents for Vehicle 1	17a.	·	335.00			
		ents for Vehicle 2		\$	389.00			
	c. Other. Spe	·		\$	0.00			
	d. Other. Spe	•		\$	0.00			
		of alimony, maintenance, and support that you did no		\$	0.00			
		your pay on line 5, <i>Schedule I, Your Income</i> (Official Fo s you make to support others who do not live with you	J. 111 1001 <i>j</i> .	\$	0.00			
	ecify:	s you make to support others who do not live with you	<b>.</b> 19.	Ψ	0.00			
	,	erty expenses not included in lines 4 or 5 of this form		ur Income				
		s on other property	20a.		0.00			
	o. Real estat		20b.	·	0.00			
		homeowner's, or renter's insurance	20c.		0.00			
		nce, repair, and upkeep expenses	20d.	·	0.00			
		er's association or condominium dues		\$	0.00			
	ner: Specify:	or 3 association of condominatin dues	21.	·				
21. <b>O</b> li	ier. Specify.				0.00			
22. <b>Ca</b> l	lculate your i	monthly expenses						
228	a. Add lines 4	through 21.		\$	4,584.00			
22b	o. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official For	m 106J-2	\$				
220	c. Add line 22	a and 22b. The result is your monthly expenses.		\$	4,584.00			
		, , ,						
		monthly net income.						
		12 (your combined monthly income) from Schedule I.	23a.	·	5,040.66			
23b	o. Copy your	monthly expenses from line 22c above.	23b.	-\$	4,584.00			
00.	0.4.4	and the same and t						
230		our monthly expenses from your monthly income.	23c.	\$	456.66			
	rne result	is your monthly net income.	230.	•	3.000			
24. <b>Do</b>	vou expect a	an increase or decrease in your expenses within the your	ear after you file this	form?				
For	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a							
mod	dification to the	terms of your mortgage?						
	No.							
	Yes.	Explain here:	<del></del>					

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Fill in this infor	mation to identify your	C350:		
Debtor 1	Carmen L. Const	antinople, Jr.  Middle Name	Last Nama	
Dahtar 0			Last Name	
Debtor 2 (Spouse if, filing)	Donna M. Consta	Intinopie Middle Name	Last Name	
(Spouse II, IIIIIIg)	i list Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	ERSEY	
Case number				
(if known)				☐ Check if this is an amended filing
You must file thi obtaining mone years, or both. 1	is form whenever you fi y or property by fraud in 8 U.S.C. §§ 152, 1341, 1	ile bankruptcy schedule n connection with a bar		mation. a false statement, concealing property, or o to \$250,000, or imprisonment for up to 20
Sig	n Below			
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill out bankruptc	y forms?
■ No				
☐ Yes. I	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	alty of perjury, I declare te true and correct.	that I have read the sur	nmary and schedules filed with thi	s declaration and
X /s/ Car	men L. Constantinor	ple, Jr.	X /s/ Donna M. Const	antinople
Carme	n L. Constantinople,		Donna M. Constant	
Signatu	re of Debtor 1		Signature of Debtor 2	
Date .	July 31, 2019		Date _ <b>July 31, 201</b> 9	

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Fill is	n this inform	nation to identify your	case.			
Debt		Carmen L. Cons				
Dobt	0	First Name	Middle Name	Last Name		
Debte (Spous	or 2 se if, filing)	Donna M. Consta	antinople  Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	DISTRICT OF NEW JER	SEY		
(if know	e number wn)				_	theck if this is an mended filing
Sta	tement			duals Filing for B	ankruptcy	4/19
inforr	nation. If m		attach a separate sheet to		additional pages, write you	
Part	1: Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. V	What is you	current marital statu	s?			
] [	■ Married □ Not mar	ried				
2. [	Ouring the la	ast 3 years, have you	lived anywhere other than	where you live now?		
]	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do no	ot include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
] [	■ No □ Yes. Ma	ike sure you fill out <i>Sch</i>	redule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
F	Fill in the tota	al amount of income you	received from all jobs and a	g a business during this yeall businesses, including parterogether, list it only once ur		ndar years?
[	□ No					
ı	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ast calenda uary 1 to De	r year: cember 31, 2018)	■ Wages, commissions, bonuses, tips	\$88,276.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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De	Donna M. Constantinople  Donna M. Constantinople				Case number (if known)						
				Debtor 1 Sources of Check all t		(befo	s income re deductions and sions)	Sc	ebtor 2 ources of inc neck all that a		Gross income (before deductions and exclusions)
				■ Wages, commissions, bonuses, tips \$80,530.			Wages, com nuses, tips	missions,	\$0.00		
				☐ Operati	ng a business				Operating a	business	
5.	Include in and other winnings.	come regard public bene If you are fil	dless of wher fit payments ing a joint ca	ther that incor ; pensions; re sse and you h	ne is taxable. Exantal income; interact income that y	amples or rest; divid you rece		re alimor llected fr it only o	om lawsuits; nce under De	royalties; an ebtor 1.	ecurity, unemployment, d gambling and lottery
	■ No □ Yes	Fill in the de	etails.								
		7 III II II II II I	otano.	Debtor 1				De	ebtor 2		
				Sources o Describe b		each (befo	s income from source re deductions and sions)	So De	purces of inc escribe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pa	ayments Yo	u Made Befo	re You Filed for	Bankrup	otcy				
6.	Are eithe ☐ No.	Neither D individual	ebtor 1 nor primarily for 90 days bef Go to line List below paid that o	Debtor 2 has a personal, fa fore you filed to 7. each creditor creditor. Do no	mily, or househo for bankruptcy, di to whom you pai of include paymer	umer del ld purpos id you pa id a total nts for do	bts. Consumer dose."  ay any creditor a to see, see, see, see, see, see, see, see	total of \$	6,825* or mo	re? rments and t	1(8) as "incurred by an he total amount you and alimony. Also, do
		* Subject			an attorney for the and every 3 year		ruptcy case. nat for cases filed	on or af	ter the date o	f adjustment	
	■ Yes.				primarily consu for bankruptcy, di		ots. ay any creditor a t	total of \$	600 or more?		
		■ No.	Go to line	7.							
		□ Yes	include pa		mestic support o		of \$600 or more s, such as child s				t creditor. Do not include payments to an
	Creditor	's Name an	d Address		Dates of payme	ent	Total amount paid		nount you still owe	Was this	payment for
7.	Insiders in of which y	nclude your o	relatives; any fficer, directo	y general part or, person in c	ners; relatives of ontrol, or owner of	any gen of 20% o		rtnership ting secu	s of which yourities; and ar	u are a gene ny managing	ral partner; corporation agent, including one fo
	■ No	Line W									
		List all payr  Name and	nents to an i Address	nsider.	Dates of payme	ent	Total amount		nount you still owe	Reason fo	or this payment

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	totor 1 Carmen L. Constantinople, Jr. Donna M. Constantinople		Cas	se number (if knowl	n)				
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost	<i>3. 3 3. 3</i>	ments or transfer a	any property on	account of a d	ebt that benefited an			
	■ No □ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name			
Pai	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures							
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.								
	■ No □ Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case			
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed, f	oreclosed, garn	ished, attached	d, seized, or levied?			
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>								
	Creditor Name and Address	Describe the Property  Explain what happened		Date	е	Value of the property			
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed  No Yes. Fill in the details.	ptcy, did any creditor, inc		nancial institutio	on, set off any a	amounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date take	e action was en	Amount			
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	■ No □ Yes								
Pai	t 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankrup  No	otcy, did you give any gift	s with a total value	of more than \$6	600 per person	?			
	☐ Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 per person	Describe the gifts			es you gave gifts	Value			
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankrup  No	otcy, did you give any gift	s or contributions v	with a total valu	e of more than	\$600 to any charity?			
	Yes. Fill in the details for each gift or cor	ntribution.							
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you	ı contributed		es you tributed	Value			
	+ S. List Contain Lagge								

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Case 19-24822-CMG Doc 1 Filed 07/31/19 Entered 07/31/19 11:47:09 Page 45 of 61 Document Carmen L. Constantinople, Jr. Debtor 2 Donna M. Constantinople Case number (if known) or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Brian S. Thomas, LLC **Attorney Fees** \$1,200.00 327 Central Ave. Suite 103 Linwood, NJ 08221 brian@brianthomaslaw.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

П

Name of trust

Yes. Fill in the details.

Description and value of the property transferred

**Date Transfer was** 

made

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Debtor 1 Carmen L. Constantinople, Jr. Debtor 2 Donna M. Constantinople

Case number (if known)

Par	List of Certain Financial Accounts, I	nstruments, Safe Depos	it Boxes, and Sto	orage Units						
20.	<ul> <li>Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?</li> <li>Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.</li> </ul>									
	Yes. Fill in the details.									
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accou instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 cash, or other valuables?	1 year before you filed fo	or bankruptcy, an	y safe deposit box or other dep	oository for securities,					
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Describe the contents  Address (Number, Street, City, State and ZIP Code)									
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?  No									
	☐ Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  Describe the contents to it?									
Par	t 9: Identify Property You Hold or Contro	ol for Someone Else								
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.									
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)			Describe the property	Value					
Par	t 10: Give Details About Environmental In	nformation								
For	the purpose of Part 10, the following defini	tions apply:								
	toxic substances, wastes, or material into	the air, land, soil, surfa	ce water, ground	<u> </u>						
Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.    No										
	Hazardous material means anything an en hazardous material, pollutant, contaminant		s as a hazardous	waste, hazardous substance, t	oxic substance,					
Rep	ort all notices, releases, and proceedings t	hat you know about, reç	gardless of when	they occurred.						
24.	Has any governmental unit notified you th	at you may be liable or	potentially liable	under or in violation of an envir	ronmental law?					
	■ No □ Yes. Fill in the details.									
		Covernmental	nit	Environmental law if	Data of notice					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental u Address (Number, ZIP Code)	Street, City, State and	Environmental law, if you know it	Date of notice					

#### Filed 07/31/19 Entered 07/31/19 11:47:09 Case 19-24822-CMG Doc 1 Page 47 of 61 Document Carmen L. Constantinople, Jr. Debtor 2 Donna M. Constantinople Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Carmen L. Constantinople, Jr. /s/ Donna M. Constantinople Carmen L. Constantinople, Jr. Donna M. Constantinople Signature of Debtor 1 Signature of Debtor 2 Date July 31, 2019 Date July 31, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

☐ Yes. Name of Person \_ . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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Debtor 1 Carmen L. Constantinople, Jr. Debtor 2 Donna M. Constantinople

nna M. Constantinople Case number (if known)

Fill in this information to identify your case:						
Debtor 1	btor 1 Carmen L. Constantinople, Jr.					
Debtor 2 (Spouse, if filing)	Donna M. Constantinople					
United States Bankruptcy Court for the: District of New Jersey						
Case number (if known)						

Check	Check as directed in lines 17 and 21:								
1	According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

#### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,616.06 266.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Donna M. Constantinople Debtor 2 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 0.00 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 4.616.06 + \$ 266.00 4,882.06 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 4,882.06 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 Copy here=> 4,882.06 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 4.882.06 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 58,584.72 15b. The result is your current monthly income for the year for this part of the form.

Carmen L. Constantinople, Jr.

Debtor 1

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Debtor 2	Do	onna M. Constantinople		Case number (if known)		
16. <b>C</b>	alcula	ate the median family income that applies to	<b>you.</b> Follow thes	e steps:		
16	6a. Fil	I in the state in which you live.	NJ			
16	6b. Fil	I in the number of people in your household.	2			
16	3c. Fill	I in the median family income for your state and	size of househol	d	\$	82,263.00
		find a list of applicable median income amount structions for this form. This list may also be ava		g the link specified in the separate	· –	
17. <b>H</b>		o the lines compare?	madic at the barn	truptoy dienke embe.		
17	7a.	■ Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N		e 1 of this form, check box 1, <i>Disposable ir ulation of Your Disposable Income</i> (Official I		
17	7b.		ulation of Your	form, check box 2, Disposable income is d Disposable Income (Official Form 122C-2		
Part 3:	(	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b	9)(4)		
18. <b>C</b>	ору у	our total average monthly income from line	11		\$	4,882.06
CC	ontend	the marital adjustment if it applies. If you are that calculating the commitment period under first income, copy the amount from line 13.				
19	9a. If t	he marital adjustment does not apply, fill in 0 on	line 19a.		<b>-</b> \$	0.00
19	9b. <b>S</b> u	ıbtract line 19a from line 18.			\$	4,882.06
		ate your current monthly income for the year.		·	<b>c</b>	4,882.06
20		opy line 19b			Φ_	
	IVIC	ultiply by 12 (the number of months in a year).			,	<b>(</b> 12
20	Db. Th	ne result is your current monthly income for the y	ear for this part o	of the form	\$	58,584.72
			·			
20	Oc. Co	ppy the median family income for your state and	size of househol	ld from line 16c	\$_	82,263.00
2.	1 Ua	ow do the lines compare?				
2	i. nc	ow do the lines compare?				
	-	Line 20b is less than line 20c. Unless otherwine period is 3 years. Go to Part 4.	ise ordered by th	e court, on the top of page 1 of this form, ch	neck box 3,	The commitment
		Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise o	ordered by the court, on the top of page 1 of	this form, c	heck box 4, The
Part 4:	9	Sign Below				
16. Cal 16a 16b 16c 17. Hor 17a 17b Part 3: 18. Cop 19a 20a 20b 20c 21.  Part 4: By X /s CSi Dat If ye	y sign	ing here, under penalty of perjury I declare that	the information o	on this statement and in any attachments is	true and cor	rect.
		armen L. Constantinople, Jr.		X /s/ Donna M. Constantinople		
		ten L. Constantinople, Jr. ture of Debtor 1		<b>Donna M. Constantinople</b> Signature of Debtor 2		
	ate _ <b>J</b>	luly 31, 2019		Date _ <b>July 31, 2019</b>		
I£		/IM / DD / YYYY hecked 17a, do NOT fill out or file Form 122C-2		MM / DD / YYYY		
	•	hecked 17b, fill out Form 122C-2 and file it with		20 of that form, convivour current monthly	incomo fron	a lina 14 abaya

Carmen L. Constantinople, Jr.

Debtor 1

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	on
\$24	5 filing fee	
\$7	5 administrati	ve fee
+ \$1	5 trustee surc	charge
\$33	5 total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

#### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Page 56 of 61 Document UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Brian S. Thomas 327 Central Ave. Suite 103 Linwood, NJ 08221 609-601-6066 brian@brianthomaslaw.com In Re: Case No.: Carmen L. Constantinople, Jr. Donna M. Constantinople 13 Chapter: Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for 1. the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: ■ Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 3,800.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: adversary proceedings, loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: \$ 1,200.00 The balance due is: \$ 2,600.00 The balance  $\square$  will  $\blacksquare$  will not be paid through the plan. □ Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ \_\_\_\_. The hourly fee charged by other members of my firm that may provide services to this client range from \$ to \$ . I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1. I have received: \$ 2. The source of the funds paid to me was: ■ Debtor(s) ☐ Other (specify below)

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Brian S. Thomas					
Date:	July 31, 2019	/s/ Brian S. Thomas			
4. I □ have or ■ have not agreed to share compensation with another person(s) unless they are members of my law firm. If I have agreed to share compensation with a person(s) who is not a member of my law firm, a copy of that agreement and a list of the people sharing in the compensation is attached.					
	■ Debtor(s)	☐ Other (specify below)			
3.	If a balance is due, the source of future compensation to be paid to me is:				

Debtor's Attorney

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## **United States Bankruptcy Court**District of New Jersey

In re	Carmen L. Constantinople, Jr. Donna M. Constantinople			
		Debtor(s)	Chapter	13
The ab	<b>VERIFICA</b> ove-named Debtors hereby verify that the att	FION OF CREDITOR		of their knowledge.
Date:	July 31, 2019	/s/ Carmen L. Constantinople, Jr.  Carmen L. Constantinople, Jr.  Signature of Debtor		
Date:	July 31, 2019	/s/ Donna M. Constantinople Donna M. Constantinople		

Signature of Debtor

ADS/Comenity/Jared PO Box 182789 Columbus, OH 43218

ADS/Comenity/Ulta PO Box 182789 Columbus, OH 43218

ADS/Comenity/Victorias Secret PO Box 182789 Columbus, OH 43218

American Express PO Box 8218 Mason, OH 45040

Bank of America PO Box 982238 El Paso, TX 79998

Buena Vista Township Tax Collector 890 Harding Highway Buena, NJ 08310

Capital One PO Box 30285 Salt Lake City, UT 84130

CBNA PO Box 6497 Sioux Falls, SD 57117

Chase PO Box 15369 Wilmington, DE 19850

Comenity - HSN PO Box 659707 San Antonio, TX 78265-9707

Discover PO Box 15316 Wilmington, DE 19850 Home Depot PO Box 6497 Sioux Falls, SD 57117

Internal Revenue Service PO Box 9012 Holtzville, NY

Kohls PO Box 3115 Milwaukee, WI 53201

Macys PO Box 8218 Mason, OH 45040

Nissan Motor Acceptance PO Box 660360 Dallas, TX 75266

PNC Bank 103 Bellevue Parkway Wilmington, DE 19809

PNC Bank PO Box 3180 Pittsburgh, PA 15230

Sears PO Box 6217 Sioux Falls, SD 57117

Syncb/Amazon PO Box 965015 Orlando, FL 32896

Syncb/Evine PO Box 965005 Orlando, FL 32896

Syncb/Lowe's PO Box 965005 Orlando, FL 32896

Synchrony Bank/TJX PO Box 965015 Orlando, FL 32896

Synchrony Bank/Walmart PO Box 965024 Orlando, FL 32896

TD Bank PO Box 84037 Columbus, GA 31908

TD Bank/Target Credit PO Box 673 Minneapolis, MN 55440

TDRCS/Raymour & Flanigan 10000 MacArthur Boulevard Mahwah, NJ 07430